

**Town of North Hempstead
Department of Parks and Recreation
1801 Evergreen Avenue
New Hyde Park, New York 11040
516 739-3001 / Fax 516 327-3120**

**Charles J. Fuschillo Park
Application For Use Of Facilities**



**Jon Kaiman
Supervisor**

**Gerard R. Olsen
Commissioner**

Name:		Date:	
Current address:			
City:		State:	ZIP Code:
Home Telephone No.		Business Telephone No.	
Purpose of Request:			
Request Date:		Approximate Number of People Attending (Limit 25)	
Permit Fee \$85.00 Each Session Time: 1 st Session – 10:00 a.m. till 12:00 p.m. Time: 2nd Session – 1:00 p.m. till 3:00 p.m.			
Do Not Write Below This Line			
Fee Received:	Make Check Payable to: "Town of North Hempstead"		Date Received:
Credit Card Visa / MC #		Expire Date:	Check No.
I hereby agree to be responsible for the people using the aforementioned facility and to abide by the rules and regulations and understand that <u>No Refund</u> will be granted.			
Signature of applicant:			Date:
Reviewed By:			Date:
Approved By:			Date: